2001 UNIFORM BUSINESS REPORT (UBR)

5/3

FILED
Jun 19, 2001 8:00 am
Secretary of State
05-03-2001 91139 004 ****61.25

DOCUMENT # N99000007132

1. Entity Name

CLEARWATER ARTS! FOUNDATION, INC.

Principal Place of Business	Mailing Address
1130 CLEVELAND STREET CLEARWATER FL 33757	POST OFFICE BOX 2457 CLEARWATER FL 33757

[redacted]

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business	3. Mailing Address
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State	City & State
Zip / Country	Zip / Country

4. FEI Number 59-3629009 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
WARGO, LYNN 1130 CLEVELAND STREET CLEARWATER FL 33757	Name: GERRI FORTINO Street Address (P.O. Box Number is Not Acceptable): 1130 Cleveland St City: CLEARWATER FL Zip Code: 33755

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the state of Florida.

SIGNATURE: Gerri Fortino GERRI FORTINO 4-25-01
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

FILE NOW: FEE IS $61.25	9. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees	Make Check Payable to Department of State

10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	P HART, NANCY 1006 ELDORADO AVENUE CLEARWATER FL 33767	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	P TRES HARDMAN, DAVID 450-11 LAKEVIEW DR PALM HARBOR, FL 34683	☐ Change ☒ Addition
TITLE D / NAME / STREET ADDRESS / CITY-ST-ZIP	S RAYMOND, GERRI 249 WINDWARD PASSAGE CLEARWATER FL 33767	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D COLE, SHEILA POST OFFICE BOX 3573 CLEARWATER FL 33767	☐ Delete	TITLE D / NAME / STREET ADDRESS / CITY-ST-ZIP	PRES COLE, SHEILA	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D MEIDEL, MICHAEL 1130 CLEVELAND STREET CLEARWATER FL 33757	☐ Delete	TITLE D / NAME / STREET ADDRESS / CITY-ST-ZIP	VP MEIDEL, MICHAEL	☑ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D VANN, KAREN POST OFFICE BOX 7278 CLEARWATER FL 33758	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D STEVE CARLISLE 34 N. FORT HARRISON AVE CLEARWATER, FL 33755	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D FREEDMAN, ROBERT A 1111 MCMULLEN BOOTH ROAD CLEARWATER FL 33759	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D JENNIE ORAMA PO BOX 13489 ST. PETERSBURG, FL 33733	☐ Change ☒ Addition

CR2E037 (10/00)

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: /S/ DAVID HARDMAN DAVID HARDMAN 4-25-01 7277848633
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #